Substitute for form 1449A/PTO & 1449B/PTO				Complete if Known				
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(use as many sheets as necassary)				Examiner Name	CARLSON N LOPEZ			
Sheet	1	of	1	Attorney Docket Number	016050-066			

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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with M.P.E.P. § 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.